U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of GILBERTO GONZALES <u>and DEPARTMENT OF THE AIR FORCE</u>, AIR LOGISTICS CENTER, San Antonio, TX

Docket No. 99-503; Submitted on the Record; Issued April 20, 2000

DECISION and **ORDER**

Before MICHAEL J. WALSH, WILLIE T.C. THOMAS, A. PETER KANJORSKI

The issue is whether appellant is entitled to a schedule award for his employment-related hearing loss.

On January 26, 1998 appellant filed a notice of occupational disease alleging that he developed hearing loss due to factors of his employment. By decision dated September 30, 1998, the Office of Workers' Compensation Programs accepted that appellant sustained a hearing loss due to occupational noise exposure in his employment, but did not grant appellant a schedule award because appellant's hearing loss was not ratable.

Appellant was employed as an aircraft electrician work leader at Kelly Air Force Base for 18 years until he retired on March 3, 1998. Appellant filed his claim (Form CA-2) with the Office after a March 23, 1998 audiogram indicated bilateral hearing loss. Medical evidence submitted in support of appellant's claim substantiated that his federal position exposed him to noise from sources that included power and pneumatic tools in the performance of duties that pertained to the inspection and maintenance of aircrafts. Additionally, appellant's employing establishment assembled evidence that indicated appellant's symptoms, signs and audiometric evaluations were compatible with mild high frequency sensorineural hearing loss in the right ear and moderate to mild high frequency sensorineural hearing loss in the left ear, and duly connected this decline in hearing to occupationally-related noise. The Office in its investigation considered the medical evidence submitted by appellant, and referred appellant on June 25, 1998 to Dr. Eduardo Madiedo, a Board-certified otolaryngologist, for otologic evaluation and examination. The Office provided Dr. Madiedo with a statement of accepted facts, available exposure information and copies of relevant medical reports and audiograms. Upon receipt of Dr. Madiedo's July 28, 1998 report and audiogram performed at his request, on September 29, 1998, Dr. H. Mobley, the district medical adviser for the Office, applied the American Medical

Association, Guides to the Evaluation of Permanent Impairment¹ to the July 21, 1998 audiogram.

By decision dated September 30, 1998, the Office denied appellant's claim for a schedule award on the grounds that, while appellant had a work-related binaural loss of hearing, the hearing loss was not sufficient to warrant a schedule award. The Office determined, however, that appellant was entitled to medical benefits for the effects of his injury, including hearing aids.

The Board has duly reviewed the case on appeal and finds that appellant is not entitled to a schedule award for his employment-related hearing loss.

The schedule award provisions of the Federal Employees' Compensation Act² set forth the number of weeks of compensation to be paid for permanent loss of use of the members listed in the schedule. The Act, however, does not specify the manner in which the percentage loss of a member shall be determined. The method used in making such determinations is a matter which rests in the sound discretion of the Office. However, as a matter of administrative practice and to ensure consistent results to all claimants, the Office has adopted and the Board has approved of the A.M.A., *Guides* as the uniform standard applicable to all claimants.³

Under the A.M.A., *Guides*, hearing loss is evaluated by determining decibel loss at the following frequency levels: 500, 1,000, 2,000 and 3,000 hertz (Hz). The losses at each frequency are added up and averaged and a fence of 25 decibels is deducted since, as the A.M.A., *Guides* points out, losses below 25 decibels result in no impairment in the ability to hear everyday speech in everyday conditions.⁴ The remaining amount is multiplied by 1.5 to arrive at the percentage of monaural hearing loss. The binaural loss is determined by calculating the loss in each ear using the formula for monaural loss. The lesser loss is multiplied by five, then added to the greater loss and the total is divided by six to arrive at the amount of the binaural hearing loss.⁵

The Office medical adviser properly applied the standardized procedures to the July 21, 1998 audiogram. Testing of appellant's left ear at the frequency levels of 500, 1,000, 2,000 and 3,000 Hz revealed decibel losses of 0, 10, 25 and 40 totaling 75 decibels. The total of 75 decibels was then divided by 4 to obtain the average hearing loss at those cycles of 18.75 decibels. The average of 18.75 decibels was then reduced by 25 decibels to equal 0, which was multiplied by the established factor of 1.5, which computed a 0 percent hearing loss for the left ear. Testing for the right ear at the frequency levels of 500, 1,000, 2,000 and 3,000 Hz revealed decibel losses of 5, 5, 25 and 45 totaling 80 decibels. The total of 80 decibels was then divided by 4 to obtain the average hearing loss at those cycles of 20 decibels. The average of 20 decibels

¹ A.M.A., *Guides* (4th ed. rev., 1993)

 $^{^2}$ 5 U.S.C. \S 8107; see generally 5 U.S.C. \S 8101-8193.

³ *Jimmy B. Newell*, 39 ECAB 181 (1987).

⁴ A.M.A., Guides at 224.

⁵ Id; see also Danniel C. Goings, 37 ECAB 781, 784 (1986).

was then reduced by 25 decibels to equal 0, which was multiplied by the established factor of 1.5, which computed a 0 percent hearing loss for the right ear. Accordingly, the Office medical adviser properly found that appellant had nonratable hearing loss in both ears.

The decision of the Office of Workers Compensation Programs dated September 30, 1998 is hereby affirmed.

Dated, Washington, D.C. April 20, 2000

> Michael J. Walsh Chairman

Willie T.C. Thomas Alternate Member

A. Peter Kanjorski Alternate Member